Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			1				Γ	RATE	FEE	1	RATE	FEE
FOR :		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			// minus 3 =		• /			X40=	40	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	· · · · · · · · · · · · · · · · · · ·
* If the difference in column 1 is			less than zero, enter "0" in column 2			olumn 2	L-	TOTAL	395	OR	TOTAL	
CLAIMS AS AMENDED - PART II								•		•	OTHER	THAN
	,	(Column 1)		(Colu		(Column 3)		SMALL E	NTITY	OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AIM	=		X40=		OR	X80=	·
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	_			• ,		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	F.O. A.M.]=		X40=		OR	X80=	
	TINOT FRESE	NTATION OF INI	JUIPLE DEP	ENDEN	CLAIN		'	+135=		OR	+270=	
							L	TOTAL			TOTAL	
		(Column 1)		(Calu	O\	(Caluman 2)		DDIT. FEE			ADDIT. FEE	
<u> </u>		CLAIMS			HEST	(Column 3)	i I		4001	l i		400
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	***		=		X\$ 9=		OR	X\$18=	\
	Independent	NTATION OF M	Minus	***	T CL AINA]=	╽┞	X40=		OR	X80=	-
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
•	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 										TOTAL	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ADDIT. FEE ADDIT.												
								• •				